

<b>SCC eFile</b>	<b>2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	214500771		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>Bethesda Lutheran Communities, Inc.</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>CORPORATION SERVICE COMPANY</b>  <b>Bank of America Center, 16th Floor</b>  <b>1111 East Main Street</b></p> <p><b>RICHMOND, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>RICHMOND CITY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>WI</b></p> </div> <div style="width: 35%; text-align: right;"> <p>DUE DATE: <b>1/31/2014</b></p> <p>SCC ID NO: <b>F1537291</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED
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<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 600 HOFFMANN DRIVE</p> <p style="text-align: center;">CITY/ST/ZIP: WATERTOWN, WI 53094</p>				
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JOHN E. BAUER  TITLE: PRESIDENT  ADDRESS: 600 HOFFMANN DRIVE  CITY/ST/ZIP/CO: WATERTOWN, WI 53094 </td> <td style="width: 50%; vertical-align: top; text-align: right;"> <input checked="" type="checkbox"/> OFFICER      <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: JOHN E. BAUER TITLE: PRESIDENT ADDRESS: 600 HOFFMANN DRIVE CITY/ST/ZIP/CO: WATERTOWN, WI 53094	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
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NAME:	ALAN H. BACHERT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	6 MONARCH TRACE COURT, 201		
CITY/ST/ZIP/CO:	CHESTERFIELD, MO 63017		
NAME:	F. PAUL CARLSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE CHAIRMAN		
ADDRESS:	4820 FOXHALL DRIVE NE		
CITY/ST/ZIP/CO:	OLYMPIA, WA 98516		
NAME:	ARVID W. SCHWARTZ	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	18600 391ST AVENUE		
CITY/ST/ZIP/CO:	GREEN ISLE, MN 55338		
NAME:	CATHERINE V. BRONDOS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7693 S. GRAPE STREET		
CITY/ST/ZIP/CO:	CENTENNIAL, CO 80122		
NAME:	ROGER BURTNER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	721 HARMONY LANE		
CITY/ST/ZIP/CO:	FULLERTON, CA 92831		
NAME:	DAVID C. COOK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5998 S. CLAYTON STREET		
CITY/ST/ZIP/CO:	LITTLETON, CO 80121		
NAME:	WILLIAM F. ELLIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4812 PORTO PINO WAY		
CITY/ST/ZIP/CO:	ANTELOPE, CA 95843		
NAME:	E. GAYLE GROTJAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	161 BIRCHWOOD TRAIL DRIVE		
CITY/ST/ZIP/CO:	MARYLAND HEIGHTS, MO 63043		
NAME:	VIRGINIA M. MILLER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1007 HICKORY LANE SW		
CITY/ST/ZIP/CO:	ROCHESTER, MN 55902		
NAME:	WILLIAM H. NIKSCH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2523 MCCLENDON STREET		
CITY/ST/ZIP/CO:	HOUSTON, TX 77030		
NAME:	DAVID C. THOMAS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	155 MAPLE GROVE WAY		
CITY/ST/ZIP/CO:	COLUMBIA, MO 65203		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DARRYL W. WINSTON DIRECTOR 6835 NORTH 112TH COURT MILWAUKEE, WI 53224	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROGER H. WOLFF DIRECTOR 751 GENEVA PARKWAY BLVD. LAKE GENEVA, WI 53147	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WALTER C. TIETJEN DIRECTOR 2905 PEPPERGRASS WAY ELK COVE, CA 95757	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ ALAN H. BACHERT SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ALAN H. BACHERT, SECRETARY PRINTED NAME AND CORPORATE TITLE	12/4/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			